SmartPay State Tax Exemption Information Form GSA SmartPay® 2

www.gsa.gov/smartpay



I. STATE / JURISDICTION / U.S. TERRITORY INFORMATION

Please indicate the state / jurisdiction / U.S. territory for which you are reporting:

State / Jurisdiction /	U.S. Territory:	Rhode Island

II. TAX EXEMPTION LISTINGS

Please indicate which of the following tax exemptions your state / jurisdiction / U.S. territory provides to government customers with centrally billed accounts and/or individually billed accounts as described below. Please also use this section to provide a description of the applicable tax exemptions, pertinent statutes, regulations, court rulings, etc. that pertain to the type of tax exemption.

Centrally Billed Accounts (CBAs) are charge card accounts paid directly by the government to the issuing bank. Individually Billed Accounts (IBAs) are charge card accounts paid directly by the cardholder to the issuing bank, but cardholders are reimbursed by the government, as official government expenses.

Individual S	tota Tay Evanuation Listing	
(Please place an ")	State Tax Exemption Listing (" in the box are exempt from taxes)	Additional Information (Description, pertinent statutes, regulations, etc.)
Sales Tax	X Travel : Centrally Billed Accounts (CBAs) X Purchase: Centrally Billed Accounts (CBAs) X Fleet: Centrally Billed Accounts (CBAs)	Regulation SU 07-48
	Travel : Individually Billed Accounts (IBAs)	
Lodging Tay	X Travel : Centrally Billed Accounts (CBAs)	
Lodging Tax	Travel: Individually Billed Accounts (IBAs)	
Hotel Occupancy Tax	X Travel: Centrally Billed Accounts (CBAs)	
	Travel: Individually Billed Accounts (IBAs)	
Public Accommodation Tax	Travel: Centrally Billed Accounts (CBAs)	NA
	Travel: Individually Billed Accounts (IBAs)	
Tourism Tax	Travel: Centrally Billed Accounts (CBAs)	NA
	Travel : Individually Billed Accounts (IBAs)	
Fleet Tax	Gasoline Diesel Fuel Alternative Fuel	NA
	Maintenance	
Other Tax	Other: please specify CBA BA	NA

III. TAX EXEMPTION FORMS

As indicated in GSA's letter, we request that the GSA SmartPay® 2 cards' design and structure suffice for tax exemption certification. If this is not possible, please indicate if your state / jurisdiction / U.S. territory requires government customers to complete any documentation in order to receive a tax exemption. Also, please indicate the website address for accessing any required forms; you may also provide the form via an email attachment.

Tax	Exempt Documentation ,	Website Address or Hyperlink:
1		
2		
3		

* CBA's - no exemption certificate required

IV. TAX RECOVERY PROCEDURES

Please indicate the procedures that government customers should follow in the event that taxes are charged to official government transactions in error.

Tax Recovery Procedures:			
A Claim for Refund must be filed by the go	overnment agency that	at paid the tax in error.	

V. CONTACT INFORMATION

Please indicate the point-of-contact for follow-up questions related to your tax exemption policies.

Last Name, First Name:	Englert, Donald	
Name of Agency:	Rhode Island Division of Taxation	
Office Address (Line 1):	I Capitol Hill	
Office Address (Line 2):		
City, State Zip:	Providence, RI 02908	
Phone Number:	401-574-8762	
Fax Number:	401-574-8914	
Email Address:	denglert@tax.ri.gov	
Web Address:	deligiert@tax.ii.gov	

Thank you for your assistance in this important matter!